Appendix 1 – Donation Statement Form

Local Elections (Disclosure of Donation and Expenditure) Act 19

Donation Statement by Member of a Local Authority

(1 January 2019 to 31 December 2019)

1. General Information			
Name of Member	SEAMUS WALSH		
Address for correspondence	GLANN, OUGHTERARD G GALWAY		
Telephone number	091-552726		
Email	Clir seamus walshad		
Fax number			
Political party, if any	FIANNA FAIL		
Local authority	GALWAY Co. Council		
Local electoral area	CONAMARA		

2. Donations

Did you rece	eive any single	e donation e	xceeding €600) in value, o	r donations f	from the sam	ıe
person exce	eding €600 in	aggregate v	alue, between	1 January	2019 and		
31 December	er 2019						

Please tick (√) one box only:	Yes	No V

3. Details of each Donation

(1) Value of Donation (€)	(2) Name and Address Of Donor	(3) Nature of Donation ¹	(4) Description of Donor ²	(5) The date on which the donation was received	(6) If the donation was requested from the Donor, what is the name and postal address of the person who requested the donation	(7) Was a receipt issued to the Donor in respect of the donation? If yes, provide the date on which the receipt issued and the name of the person who issued the receipt
0	M					

 ¹ For example, cash/cheque, use of property, services, etc.
 2 For example, family member, friend, company, political party, etc.

4. Statutory Declaration

SEAMUS	WALSH	
		do solemnly and sincerely declare that the above statement is,
to the best of my knowled	edge and belief, co	prrect in every material respect and that I took all reasonable action
in order to be satisfied a	s to its accuracy.	I make this solemn declaration conscientiously believing the same
to be true and by virtue		
Signed Seam.	us Walst	
Declared before me	Day of War ioner] [practicing	LLEY[name in capitals] a [notary public] [commissioner for solicitor] by
who is personally known	n to me,	
or		
w ho is identified to me t or	y	who is personally known to me
passport no. authorities of Gevernment or national identity by the authorit Genfederation of Aliens Passport on	card no	e before the taking of this Declaration by the production to me of sport number] issued on
at lleyeus	EN, Coff	[place of signature]
this day of	many lesteld	Russell & O'Malley Solicitors
0.00	0	Unit1, Garraí Mhé, Mountain Road
700	say.	Moycullen, Co. Galway
[signature of witness]	/	, and a survey

Tel: 091 556356/7 Fax: 091 556359

Please note that a witness <u>must</u> belong to one of the following categories: Commissioner for Oaths / Notary Public / Peace Commissioner / Practicing Solicitor.

PENALTIES

A person who knowingly makes a false or misleading statutory declaration is liable on conviction to a fine not exceeding €3,000 or imprisonment for a term not exceeding six months or both.